

FEC FORM 5

PAGE 1 / 4

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED**To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations**

1. (a) Name of Individual, Organization or Corporation DEFENDERS OF WILDLIFE ACTION FUND	
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1130 17TH STREET NW	
(c) City, State and ZIP Code WASHINGTON DC 20036	
3. FEC Identification Number C C90007907	
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Individual filers only	Name of Employer Occupation

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report ☐ 24-Hour Report ☒ 48-Hour Report
☐ July 15 Quarterly Report
☐ October Quarterly Report
☐ January 31 Year-End Report

(b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

M M / D D / Y Y Y Y

THROUGH

M M / D D / Y Y Y Y

6. TOTAL CONTRIBUTIONS

.00

7. TOTAL INDEPENDENT EXPENDITURES.....

112999.14

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Anne Saer

10/13/2006

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. 437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 / 4

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee
Zata 3

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	2		2	0	0	6

Mailing Address
1200 G Street #800

Amount

100045.00

City
WashingtonState
DCZip Code
20005Purpose of Expenditure
Phone CallsCategory/
Type 004
 Office Sought: ☒ House State: CA
☐ Senate District: 11
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For: ☐ Primary ☐ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Zata 3

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	2		2	0	0	6

Mailing Address
1200 G Street, # 800

Amount

10045.00

City
WahsingtonState
DCZip Code
20005Purpose of Expenditure
Phone callsCategory/
Type 004
 Office Sought: ☒ House State: CA
☐ Senate District: 11
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:
Jerry McNerneyCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For: ☐ Primary ☐ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
United Site Services

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	2		2	0	0	6

Mailing Address
3408 Hillcap Ave

Amount

997.00

City
San JoseState
CAZip Code
95136Purpose of Expenditure
Portable restroomsCategory/
Type 001
 Office Sought: ☒ House State: CA
☐ Senate District: 11
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For: ☐ Primary ☐ General☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

111087.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **3 / 4**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee
Strizzi's

Date

M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 6Mailing Address
2205 1st St

Amount

329.00

City
LivermoreState
CAZip Code
94550Purpose of Expenditure
Food for volunteersCategory/
Type

007

Office Sought:

☒

House

State: CA

House

☐

Senate

☐

President

District: 11

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
AT & T

Date

M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 6Mailing Address
P.O. Box 9039

Amount

784.00

City
San FranciscoState
CAZip Code
90483Purpose of Expenditure
PhoneCategory/
Type

001

Office Sought:

☒

House

State: CA

House

☐

Senate

☐

President

District: 11

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Verizon Wireless

Date

M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 6Mailing Address
p.o. Box 9622

Amount

240.00

City
Mission HillsState
CAZip Code
91346Purpose of Expenditure
Phone serviceCategory/
Type

001

Office Sought:

☒

House

State: CA

House

☐

Senate

☐

President

District: 11

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

1353.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **4 / 4**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee
Federal Express

Date

M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 6Mailing Address
6070 Johnson Drive

Amount

141.00

City State Zip Code
Pleasanton CA 94588Purpose of Expenditure
Courier servicesCategory/
Type 001Office Sought: ☒ House State: CA
House ☐ Senate District: 11
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought .00Disbursement For: ☐ Primary ☐ General
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Conference America

Date

M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 6Mailing Address
P.O. Box 241188

Amount

68.14

City State Zip Code
Montgomery AL 36124Purpose of Expenditure
Conference CallCategory/
Type 001Office Sought: ☒ House State: CA
House ☐ Senate District: 11
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought .00Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Date

M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 6Mailing Address
555 Peters Ave

Amount

350.00

City State Zip Code
Pleasanton CA 94566Purpose of Expenditure
Travel expensesCategory/
Type 001Office Sought: ☒ House State: CA
House ☐ Senate District: 11
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought .00Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

559.14

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

112999.14